Amendment dated December 14, 2007

Reply to Office Action dated October 1, 2007

Amendments to the Claims

The following listing of claims will replace all prior versions, and listings, of claims in the application:

Listing of Claims:

Claims 1-11 (Canceled).

Claim 12 (Currently amended): A surgical device for providing a working passage through tissue, the surgical device comprising:

an elongate tubular member having proximal and distal openings defining a bore therethrough, the elongate tubular member being rigid and the bore forming the working passage for an operating tool; and

at least two wall a plurality of wall segments disposed on said tubular member, each wall segment having an uninflated state and an inflated state, wherein the plurality of wall segments includes at least two wall segments in an abutting relationship when in the uninflated state wherein the at least two wall segments are longitudinally spaced apart on said tubular member.

Claim 13 (Previously presented): The surgical device of claim 12, wherein the bore is dimensioned to receive an endoscopic instrument.

Claim 14 (Previously presented): The surgical device of claim 12, wherein each wall segment extends circumferentially about the tubular member.

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Claim 15 (Previously presented): The surgical device of claim 12, wherein a surface of each wall

segment is substantially flush with an exterior surface of said tubular member when said wall

segment is in the uninflated state.

Claim 16 (Previously presented): The surgical device of claim 12, wherein each wall segment

has an outside diameter greater than an outside diameter of the tubular member when said wall

segment is in the inflated state.

Claim 17 (Currently amended): The surgical device of claim 12, wherein the plurality of wall

segments are selectively inflatable such that, when the at least two wall segments are in the

inflated state, the at least two wall segments define a gap therebetween.

Claim 18 (Canceled).

Claim 19 (Currently amended): A method of positioning a surgical access device through tissue

of a patient, the method comprising the steps of:

inserting the surgical access device through tissue, said surgical access device

comprising:

an elongate tubular member having proximal and distal openings defining a bore

therethrough, the elongate tubular member being rigid and the bore forming the working passage

for an operating tool; and

first and second a plurality of wall segments disposed on said tubular member,

each wall segment having an uninflated state and an inflated state, wherein the plurality of wall

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segments includes at least two wall segments in an abutting relationship when in the uninflated

state wherein the first and second wall segments are longitudinally spaced apart on said tubular

member;

introducing a fluid under pressure to the a first wall segment causing it to go from its

uninflated state to its inflated state; and

positioning said surgical access device such that at least a portion of the first wall

segment is in contact with tissue.

Claim 20 (Previously presented): The method of claim 19, wherein said bore is dimensioned to

accommodate an endoscopic instrument.

Claim 21 (Currently amended): The method of claim 19, further comprising the step of:

introducing a fluid under pressure to the a second wall segment causing it to go from its

uninflated state to its inflated state and defining a gap between said first and second wall

segments.

Claim 22 (Canceled).

Claim 23 (Previously presented): The surgical device of claim 12, further including a retractor

repositionable through the elongate tubular member, the retractor comprising:

a shaft having proximal and distal openings, the proximal and distal openings defining a

bore therethrough; and

an expandable member attached at a distal end of the shaft, the expandable member in

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fluid communication with the proximal opening of the shaft.

Claim 24 (Previously presented): The surgical device of claim 12, wherein the elongate tubular

member is formed of a rigid material.

Claim 25 (Previously presented): The method of claim 19, wherein the elongate tubular member

is formed of a rigid material.

Claims 26-31 (Cancelled).

Claim 32 (New): The surgical device of claim 12, wherein the plurality of wall segments

includes at least two wall segments adapted to maintain their abutting relationship during

inflation.

Claim 33 (New): The surgical device of claim 12, wherein the plurality of wall segments

includes at least two wall segments in an abutting relationship when in the inflated state.

Claim 34 (New): A surgical device comprising:

an elongate tubular member defining a passage therethrough that is configured to

removably receive an operating tool; and

a plurality of selectively inflatable wall segments disposed along the tubular member,

each wall segment being configured to engage tissue in substantially sealed relation upon the

inflation thereof such that the tissue may be sealed at one or more selected locations along the

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elongate tubular member, wherein the plurality of wall segments includes at least two wall

segments in an abutting relationship.

Claim 35 (New): The surgical device of claim 34, wherein the plurality of wall segments

includes at least two wall segments adapted to maintain their abutting relationship during

inflation.

Claim 36 (New): The surgical device of claim 35, wherein the plurality of wall segments

includes at least two wall segments in an abutting relationship when in the inflated state.